

# Business Personal Property Listing

**2010****Due by January 31, 2010****Brunswick County Tax Department**

PO Box 269

Bolivia, NC 28422

(910) 253-2829

<http://www.brunswickcountync.gov/>

For Tax Office Use Only			Account	Parcel ID	
Abstract			TWP	City	Value
Legal Name			County Code		
			Date Business Began in this County		
Trade Name			Date Business (Fiscal) Year Ends		
			<b>Select One Business Type</b>		
Address			<input type="radio"/> Partnership <input type="radio"/> Sole Proprietorship		
			<input type="radio"/> Corporation <input type="radio"/> LLC		
City			<input type="radio"/> Other (Specify)		
State					
ZIP					
Phone			<b>Select One Business Category</b>		
FAX			<input type="radio"/> Retail <input type="radio"/> Wholesale <input type="radio"/> Manufacturing		
Email			<input type="radio"/> Service <input type="radio"/> Farming <input type="radio"/> Leasing/Rental		
Website			<input type="radio"/> Other (Specify)		
Name in which business was Listed Last Year					
What is the principal business in this county?			<b>Complete If Business Is Closed...</b>		
Physical Address			Date Ceased		
			Select Reason		
City			<input type="radio"/> Sold <input type="radio"/> Closed		
State			<input type="radio"/> Bankrupt		
ZIP					
Real Estate Owned By			Sold Equipment, Fixtures And Supplies To		
Contact Person For Audit			Address		
Company			City		
			State		
Address			ZIP		
			Phone		
City			<b>List ALL NC Counties Where Business Personal Property is Located</b>		
State					
ZIP					
Phone					
FAX					
Email					
Owner/Partner			Phone		
Owner/Partner			Phone		

**Instructions:**

Please complete the required schedules based on items you own. For business owners, please complete all schedules.

Unregistered Vehicles(s) - **Schedule D-1**  
Mobile Home(s)/Office(s) - **Schedule D-4**Boat(s) and Watercraft - **Schedule D-2**  
Farm and Lawn Equipment - **Schedule F**Aircraft - **Schedule D-3**  
Billboard(s) - **Schedule H**Detailed instructions, additional schedules and electronic worksheets are available from our website at <http://www.brunswickcountync.gov/> or by contacting the Business Personal Property Tax Office by telephone at (910) 253-2829.**LISTINGS MARKED "SAME AS LAST YEAR" WILL NOT BE ACCEPTED**

## **Schedule A - Business Personal Property**

**Abstract #:**

## 2010

**List ALL Business Personal Property in detail. Attach additional schedules if needed**

[illegible]

## **Schedule A - Business Personal Property**

**Abstract #:**

## 2010

**List ALL Business Personal Property in detail. Attach additional schedules if needed**

[illegible]

## Schedule A - Business Personal Property

**Abstract #:**

## 2010

Continued from previous page. Attach additional schedules if needed.

[illegible]

## Schedule B - Tangible Personal Property Under Construction (CIP)

**Report 100% of the cost of all personal property carried in a CIP account as of January 1.**

\$ \_\_\_\_\_

## Schedule C - Supplies Not Held for Resale as of January 1

List cost for each category below. Expense records, receipts or other documentation may be required to support all costs listed.

<b>Fuels (held for consumption)</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>Maintenance and Janitorial Supplies</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>Office Supplies</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>Medical, Dental Beauty and Barber Supplies</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>Replacement Parts, Spare Parts and Hand Tools</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>Restaurant, Hotel and Motel Items (linens, china, silverware, etc.)</b>	<b>100% Cost</b>	<b>\$</b> _____
<b>All other Miscellaneous Supplies not listed above</b>	<b>100% Cost</b>	<b>\$</b> _____
	<b>Total</b>	<b>\$</b> _____

## Schedule D - Vehicles, Watercraft, Aircraft and Mobile Homes/Offices

Abstract #: 2010

Please answer the following questions and complete the required schedules for any questions answered 'YES'

<b>D-1</b> Does your business own any Unregistered Vehicles? <span style="float:right">O Yes O No</span> Does your business own any Multi-year or Permanently registered Trailers? <span style="float:right">O Yes O No</span> Does your business own any Special Bodies on Vehicles? <span style="float:right">O Yes O No</span>							
Year	Make	Model	Body/Size	Special Body Cost	VIN	Original Cost	Year Acquired

  

<b>D-2</b> Does your business own any Watercraft, Jet Skis or Watercraft Engines? <span style="float:right">O Yes O No</span>							
Type	Year/Make/Model	Length/Size	Registration #	Location	Engine Type	Original Cost	Year Acquired

  

<b>D-3</b> Does your business own any Aircraft? <span style="float:right">O Yes O No</span>						
Year	Make	Model	N-Number Tail Number	Location	Original Cost	Year Acquired

  

<b>D-4</b> Does your business own any Mobile Homes or Mobile Offices? <span style="float:right">O Yes O No</span>						
Year	Make	Width x Length	ID/VIN	Location	Original Cost	Year Acquired
		x				
		x				
		x				
		x				

## Schedule E - Separately Scheduled Property

Does your business own any artwork, displays, statues or other personal property that is separately scheduled for insurance purposes? If 'Yes', please describe the item(s) below and provide an estimated value. <span style="float:right">O Yes O No</span>					
Description	Year Acquired	Estimated Value	Description	Year Acquired	Estimated Value

## Schedule F - Farm or Lawn Equipment

Does your business own any tractors and/or other farm or lawn care equipment? Please itemize below. <span style="float:right">O Yes O No</span> <span style="float:right">O Cost on Schedule A?</span>					
Year	Description or Make	Model or Series	Gas or Diesel	Year Acquired	Original Cost

## Schedule G - Expensed Items

Abstract #:

**2010**

Report any assets which would typically be capitalized including Section 179 expensed items.  
Please specify your Capitalization Threshold to the right.

Capitalization Threshold  
\$

Description	Year Acquired	Original Cost Installed	Description	Year Acquired	Original Cost Installed

## Schedule H - Billboards/Outdoor Advertising Structures

Does your business own any Billboards or Outdoor Advertising structures? If 'Yes' please attach a completed Schedule H-1

O Yes O No

## Schedule I - Leased Property

Please provide the Lease Information requested below for property in your possession that is owned by someone else.

Owner Name			Item Description		
Mailing Address			Selling Price New		Annual Rent
City	State	ZIP	Lease Start Date		Lease End Date
Phone			Capitalized? O Yes O No		
Owner Name			Item Description		
Mailing Address			Selling Price New		Annual Rent
City	State	ZIP	Lease Start Date		Lease End Date
Phone			Capitalized? O Yes O No		
Owner Name			Item Description		
Mailing Address			Selling Price New		Annual Rent
City	State	ZIP	Lease Start Date		Lease End Date
Phone			Capitalized? O Yes O No		

## Affirmation

Listing Form **MUST** be signed by a  
Legally Authorized Person

To Avoid Late Listing Penalty,  
Complete and Return by January 31, 2010

Under penalties prescribed by law, I hereby affirm that to the best of my knowledge and belief this listing, including any accompanying statements, schedules, and other information, is true and complete. If this affirmation is signed by an individual other than the taxpayer, he/she affirms that he/she is familiar with the extent and true value of all the taxpayer's property subject to taxation in this county and that his/her affirmation is based on all the information of which he/she has any knowledge.

Listing **MUST** be signed by a **PRINCIPAL OFFICER** of the taxpayer or a **FULL-TIME** employee of the taxpayer who has been officially empowered by the principal officer to list the property.

**FORMS WITHOUT SIGNATURE WILL BE RETURNED**

**AGENTS and CPAs ARE NOT AUTHORIZED TO SIGN THIS FORM**

Signature (Owner/Principal)		Date	Preparer Other Than Taxpayer		Date
Printed Name		Printed Name			
Title	Phone	Phone			

Any individual who willfully makes and subscribes an abstract listing required by the Subchapter (of the Revenue Laws) which he/she does not believe to be true and correct as to every material matter shall be guilty of a Class 2 Misdemeanor